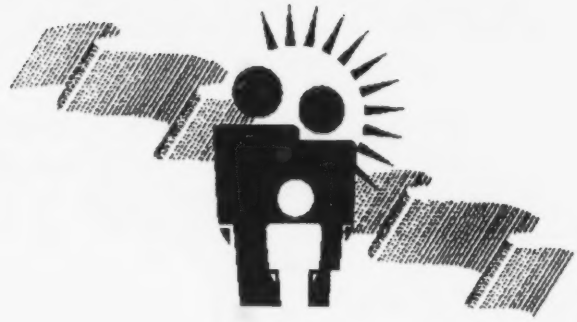
Annual Report of the Director of Child and Family Services

1998-1999

Northwest Territories

Health and Social Services



Annual Report of the Director of Child and Family Services

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103-05745/

A Message from the Director of Child and Family Services

As required by the *Child and Family Services Act*, I hereby submit the Annual Report of the Director of Child and Family Services for the period of April 1, 1998 to March 31, 1999.

During this year, considerable energy was been spent implementing the new *Child and Family Services Act* and *Adoption Act,* both of which came into force during the fall of 1998. Preparation for the creation of Nunavut was also a major focus.

This report reviews the state of the health and well-being of all children and youth in care in the NWT during the 1998-1999 fiscal year. Additional information is provided regarding the social environment in which they live.

I wish to thank all those who have supported NWT children in care. Throughout this past year we have endeavoured to provide the best possible assistance and support in a sensitive and caring manner.

Respectfully submitted,

C Praamsma

Ms. Catherine Praamsma
Director of Child and Family Services

Executive Summary

The 1998-99 annual report highlights implementation of the new *Child and Family Services Act* and the *Adoption Act*. A major focus during this fiscal year was to prepare Child Protection Workers and Adoption Workers for their roles and responsibilities under these new Acts.

This year also marked the last year of reporting on both Nunavut and the NWT, as division of the former NWT into two new territories took place on April 1, 1999. In anticipation of division, the statistics in this report reflect Nunavut and the new NWT.

Overall, implementation of the new legislation went well. Changes within the new legislation have provided communities greater opportunity to address child and family issues more effectively. This is an opportunity to have more direct involvement with children and families through the use of Plan of Care Agreements and Community Agreements.

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Introduction

The fiscal year of 1998/99 has seen very significant changes in the way in which children in the NWT are cared for through the Child and Family Services Program. This is a result of the implementation of the new *Child and Family Services Act (C&FS Act)* on October 30, 1998, and the *Adoption Act* on November 1, 1999. The Department also prepared for the creation of Nunavut on April 1, 1999. For example, the Department began to report on Nunavut and NWT statistics separately in anticipation of the division. Both of these changes are reflected in the information presented in this year's report.

Major Changes in Legislation

The *C&FS Act* and *Adoption Act* have initiated some major changes in the way that services are provided to children, youth and families by the Department and health and social services boards. These changes are briefly described below.

Best Interest of the Child

The *C&FS Act* now provides a legislative basis for defining the *"best interest of the child"*, with recognition and respect given to differing cultural and spiritual values and practices. This dimension of northern life was not recognized in the former *Child Welfare Act,* although it has been recognized as a policy of the Department since the 1970s.

Definition of a Child

The *C&FS Act* provides for the protection of children from 0 to 15 years of age. This is consistent with the *United Nations Convention of the Rights of the Child*. This differs from the previous *Child Welfare Act* which defined children as persons up to, and including, 18 years of age.

With reduction of the age of children in protective status from 17 to 15 years of age, the number of children in care should decrease. However, the overall number of people requiring support services are likely to increase for both children and youth.

Voluntary Support Agreements

Under the *C&FS Act,* a Child Protection Worker may enter into a Voluntary Support Agreement with the family of a child to address the needs of the family and child. Voluntary Support Agreements are often viewed as a first step in supporting the family.

Voluntary Support Agreements do not require court approval, but are an agreement between the parent(s) and the Director of Child and Family Services. They are not meant to be used with children who are believed to be in need of protection or to prevent the investigation and processing of a child's protection concerns. They are to be used with children and families to provide support and services. These supports and services include counselling, respite care, and drug and alcohol treatment.

Support Services Agreements

Support Services Agreements under the *C&FS Act* are similar to the previous Voluntary Support Services Agreements which were part of policy (not legislation) under the previous child welfare program. Although this has similarities to the previous agreement, the new Support Services Agreement is entrenched in legislation. In addition, under new Support Services Agreements, there are a greater variety of services that can be offered.

This form of agreement/arrangement is used to support youth 16 to 19 years of age who are in severe conflict with their family. This status allows the Director of Child and Family Services to support and provide services for those youth who desire to continue with school or employment, but who for various reasons, cannot be supported by the

family. These services are provided through a contract with the youth and/or their parents.

Plan of Care Committees and Agreements

When a child is believed to be in need of protection, the *C&FS Act* provides an alternative to the court process through the use of a Plan of Care Committee. The Committee is comprised of the child (if the child is 12 years of age or older), parents, Child Protection Worker, extended family, and any other appropriate community members. The Committee is responsible for assisting the child and parents in developing a Plan of Care Agreement to address the protection concerns and the child and family's needs.

The previous *Child Welfare Act* required that all child protection matters go to court. The Committee and Plan of Care Agreement are utilized in place of bringing the matter before the court. This new approach offers a more amicable alternative to families and children.

The Plan of Care Agreement is developed and agreed to by the members of the committee. Ideally, it is the action plan which is expected to protect the child and resolve the issues that led the Child Protection Worker to determine that the child was in need of protection.

Child Participation in Decision Making

Under the new *C&FS Act*, children 12 years and older must be given the opportunity to participate in the decisions that will affect them. Children have the ability to express their opinion and desires about the decisions that will affect their life.

Creation of the Adoption Act

Under the previous *Child Welfare Act,* adoptions were legislated and administered as part of that Act. However, the *C&FS Act* does not include primary adoption legislation. A new *Adoption Act* was created to govern adoption matters. The *C&FS Act* provides for the surrendering of children by parents for adoptions.

Access to Parent of Children in Permanent Custody

Under the *C&FS Act,* parents of children in permanent custody have the right to request access to their children although their primary parenting rights to the child have been removed. The Act permits the court to grant several variations of access to children including visitation. The *Child Welfare Act* did not allow for access.

The Creation of Nunavut

Although the creation of Nunavut will not formally occur until April 1, 1999, the Department has been preparing for this event by developing all statistical information to reflect Nunavut and the new NWT.

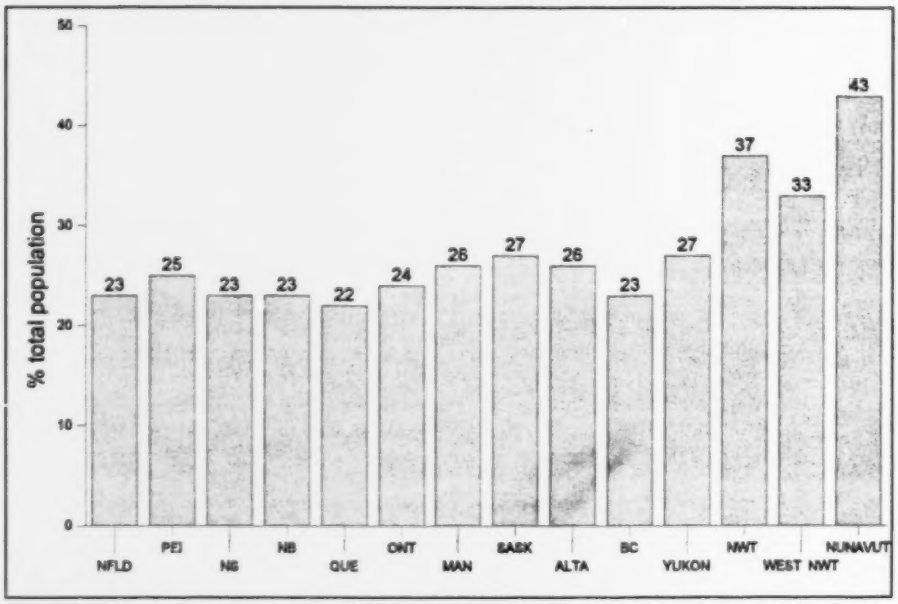
Children in the North

Demography

In 1998/1999, nearly one-third of the population of the NWT is 17 years of age or younger (Statistics Canada). Both Nunavut and the NWT lead the rest of the Canadian provinces/territories in having the highest percentage of this youngest population (Figure 1). Almost one-half of the total population of Nunavut is 17 years of age or younger, while in the NWT, one-third of the total population is 17 years of age or younger.

Note: National statistics for children usually include children up to the age of 18. Figure 1 presents NWT statistics in light of other jurisdictions; however, it should be noted that under the *C&FS Act*, a child in need of protection applies to those that are up to the age of 16.

Figure 1: Children 17 Years and Under by Province and Territory 1998



Source: Statistics Canada

Our children are the strength of our future. These higher percentages make clear the need for the NWT to continue to place a high priority on the health and well-being of children and youth. Indeed, the proportionally greater percentage of children and youth in the NWT suggests that the GNWT should invest higher resources in the support of this age group compared to the rest of Canada.

Assessing the health and social well-being of children between 0 and 19 is a difficult task. However, recent research on child and youth development indicates focusing on prevention and health promotion at an early age, especially in the first five years of life, promotes better health outcomes in adult life. Early identification of health issues and available intervention resources may make the greatest impact on quality of life (both now and later on) while also being the most economical.

The population distribution for Nunavut and the NWT is indicated in Table 1. A review of the distribution of the children 17 years and under in comparison with the total, indicates that Nunavut has a higher percentage of children and youth, with the percentages dropping in the NWT. In addition, there are proportionately higher numbers of children in the smaller communities than there are in the larger centres like Yellowknife.

Table 1: Estimated Proportion of Population - Children and Youth (July 1998)

All Ages	NWT (%)	Nunavut (%)
0 - 4 years	3,686 (9)	3,490 (13.2)
5 - 9 years	4,155 (10.1)	3,540 (13.4)
10 - 14 years	3,523 (8.6)	2,799 (10.6)
15 - 19 years	3,123 (7.6)	2,435 (9.2)
20 + years	26,588 (64.7)	14,189 (53.6)
Total	41,075	26,453

Source: NWT Bureau of Statistics

Determinants of Child Health and Well-being

Research over the years has shown that there are factors which are predictive of increased overall health and well-being. Some of these determinants include educational success, stable and adequate levels of family income (economics), suitable housing, balanced meals and healthy lifestyles.[1]

Children and Education

The highest level of education achieved has long been recognized as a key factor in determining adult health and well-being. Educational achievement is usually directly linked to the individual's income level. Children of families benefit directly through higher income levels as they have access to improved nutrition and housing.

Preschool Years

Programs such as Community Wellness, Brighter Futures, Aboriginal Head Start, Healthy Children's Initiative and the *Day Care Act* place a strong focus on the early years of healthy development. We believe that healthy growth and development during the first years of a child's life builds the foundation for future health and well-being. As a result, the early years are an area of focus for programs and services.

Learning begins at birth and is a life-long activity for all persons. The skills and practice required for later learning success are first introduced to each child in the home. These may be further supported when the pre-school age child attends such programs as Aboriginal Head Start, nursery schools, day cares and toy lending libraries. The preschool

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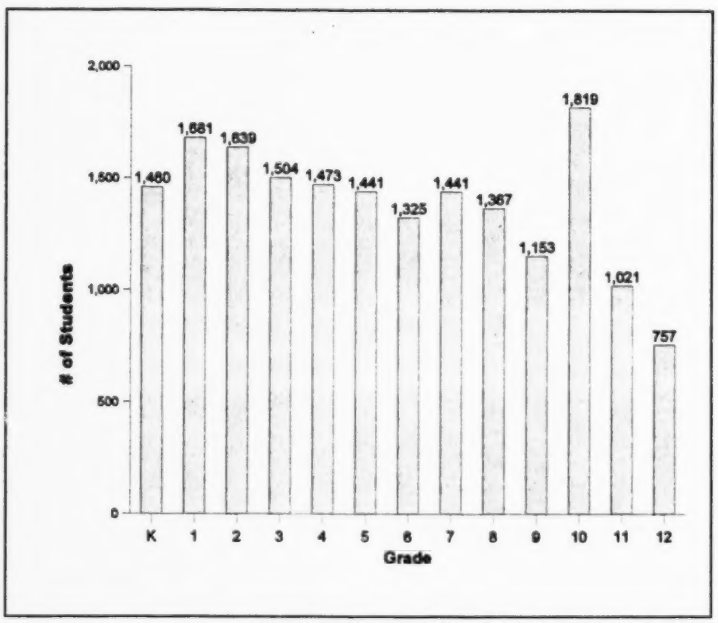
[1] For additional information please refer to the National Longitudinal Study on Children and Youth website at: www.hrdc-drhc.gc.ca/arb/nlscy-elnej/home.shtml.

years prepare a child for later success at school. Therefore, the programs for enhanced developmental opportunities, experiences and stimulation such as the Aboriginal Head Start programs, Healthy Children Initiatives and Brighter Futures programs in the NWT are contributing to our children's life-long health and well-being.

Elementary and Secondary School

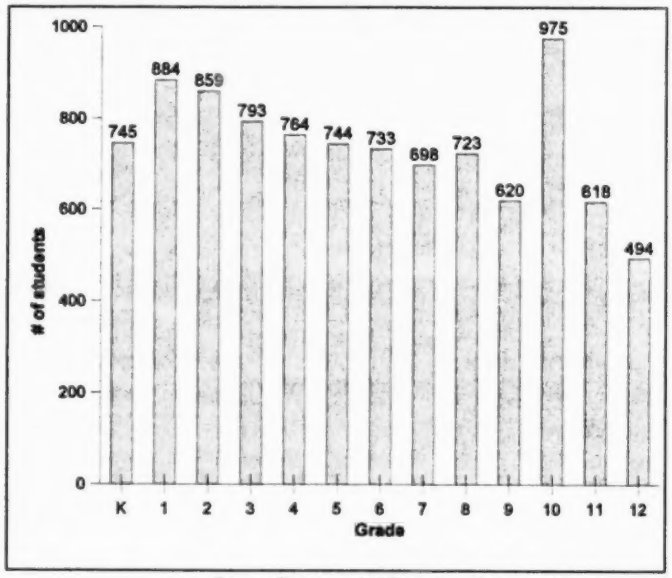
The largest number of student enrolment in schools across the NWT is currently Grade 10 (Figure 2). This is consistent for both the Nunavut and NWT (Figure 3 and 4). Grade 10 enrolments are higher than age population numbers quoted earlier in this report, suggesting that youth of other (older) ages are attending grade 10 classes.

Figure 2: Student Enrolment by Grade (Western NWT and Nunavut)



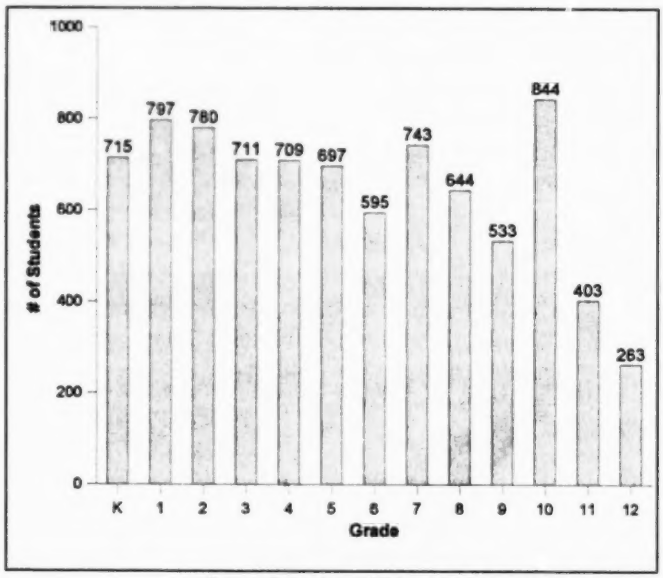
Source: Department of Education, Culture and Employment

Figure 3: Student Enrolment by Grade in Western NWT, 1998/99



Source: Department of Education, Culture and Employment

Figure 4: Student Enrolment by Grade in Nunavut, 1998/99



Source: Department of Education, Culture and Employment

Post Secondary Education

Completion of post secondary education is an indicator of both academic success and increased earning power. The number of persons attending some form of post secondary education is an indicator of increased economic potential and therefore, of the potential health and well-being of the population. Historically, the NWT has seen, and continues to see, an increase in the overall education levels achieved by its citizens.

Table 2: Education Levels Achieved in Nunavut

Population Sector	Number of Students (%)		
	1986	1991	1996
Total Population 15 years and older	11,220 (100.0)	12,865 (100.0)	15,180 (100.0)
Less than Grade 9	5,990 (53.9)	5,390 (41.9)	4,690(30.9)
High School without Certificate	2,245 (20.0)	2,030 (15.8)	3,350 (22.1)
High School with Certificate	420 (3.7)	560 (4.3)	635 (4.2)
Trade or other Non-University	1,560 (13.9)	3,620 (28.1)	4,805 (31.7)
University without Degree	390 (3.5)	500 (3.8)	660 (4.3)
University with Degree	615 (5.5)	760 (5.9)	1,040 (6.8)

Source: Statistics Canada, Census, 1986-96

Prepared by the NWT Bureau of Statistics

Table 3: Education Levels Achieved in the Western NWT

Population Sector	Number of Students (%)		
	1986	1991	1996
Total population 15 years and older	23,710 (100.0)	25,690 (100.0)	27,965 (100.0)
Less than Grade 9	5,590 (23.5)	4,960 (19.3)	4,110 (14.7)
High School without Certificate	5,860 (24.7)	5,330 (20.7)	6,110 (21.8)
High School with Certificate	1,750 (7.4)	2,360 (9.2)	2,365 (8.4)
Trade or other Non-University	6,295 (26.5)	7,760 (30.2)	9,280 (33.2)
University without Degree	1,935 (8.2)	2,355 (9.2)	2,590 (9.3)
University with Degree	2,280 (9.6)	2,925 (11.4)	3,150 (11.3)

Source: Statistics Canada, Census, 1986-96
Prepared by the NWT Bureau of Statistics

Tables 2 and 3 show the grade and post-secondary progress achieved by the population is improving.

Income Levels

The security of a regular and adequate family income usually indicates how well the children in the family are cared for, and needs such as clothing, balanced meals and healthy and safe homes are provided. Therefore, the higher the level of parent/family income, the better the potential for child health.

The average income for the NWT was $33,767, which was significantly higher than the national average of $26,554 (Statistics Canada, 1996). However, a closer analysis reveals a high variation in income across the NWT and across age ranges. This suggests that there are still some children at greater risk for living with the effects of family poverty.

Table 4: Household Income Distribution in Nunavut

Amounts	1986 (%)	1991 (%)	1996 (%)
All Households	3,895 (100.0)	4,930 (100.0)	6,215 (100.0)
< $10,000	660 (16.9)	405 (8.2)	585 (9.4)
$10,000 - $19,999	825 (21.2)	745 (15.1)	960 (15.4)
$20,000 - $29,999	655 (16.8)	725 (14.7)	865 (13.9)
$30,000 - 39,999	575 (14.8)	650 (13.2)	685 (11.0)
$40,000 - $49,999	400 (10.3)	590 (12.0)	585 (9.4)
$50,000 and over	765 (19.6)	1,785 (36.2)	2,540 (40.9)

Source: Statistics Canada, Census, 1986-96
Prepared by the NWT Bureau of Statistics

Table 5: Household Income Distribution in the Western NWT

Amounts	1986 (%)	1991 (%)	1996 (%)
All Households	8,875 (100.0)	11,145 (100.0)	12,605 (100.0)
< $10,000	840 (8.5)	735(6.5)	825 (6.6)
$10,000 - $19,999	1,255 (12.7)	1,220 (10.6)	1,335 (10.9)
$20,000 - $29,999	1,355 (13.7)	1,060 (9.0)	1,135 (9.5)
$30,000 - $39,999	1,485 (15.0)	1,105 (8.1)	1,015 (9.9)
$40,000 - $49,999	1,510 (15.3)	1,075 (8.2)	1,030 (9.6)
$50,000 and over	3,445 (34.9)	5,985 (57.5)	7,250 (53.7)

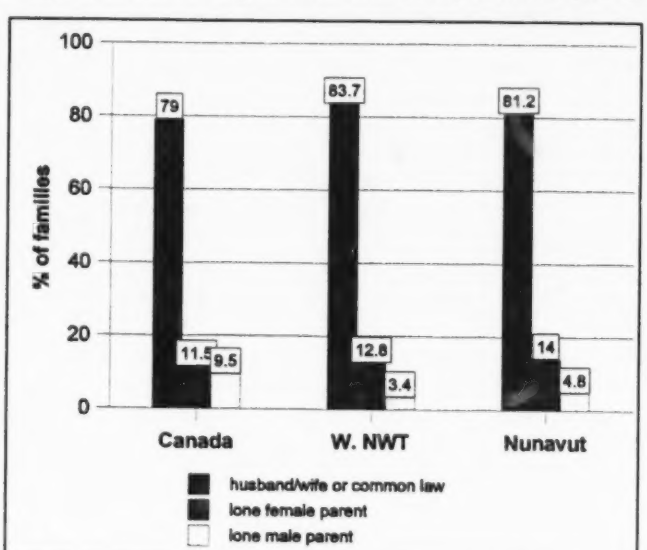
Source: Statistics Canada, Census, 1986-96
Prepared by the NWT Bureau of Statistics

Family Composition

The composition of the family is also seen as an indicator of child well-being. On average, two parent families are more likely to provide a better environment for children than single parent families.

The family make up in Nunavut and the Western NWT, when last studied in 1996, appeared to have some similarity with the rest of Canada (Figure 5 and Table 6). While the proportion of single parent families compares closely to the national average, single male parent families are less than half the national average. It is also important to note that while children face greater challenges in single parent families, children from single female parent families in the NWT face additional economic challenges, primarily because women tend to earn less than their male counterparts.

Figure 5: Comparison of Family Structure in NWT, Nunavut and Canada, 1996



Source: Statistics Canada and NWT Bureau of Statistics, 1996 Census

Table 6: Comparison of Family Structure in the NWT, Nunavut, Canada (1996)

	Number of Families (%)		
	Western NWT	**Nunavut**	**Canada**
Total Families	**9,725 (100.0)**	**5,230 (100.0)**	**7,837,865 (100.0)**
Husband/ Wife or Common Law	8,140 (83.7)	4,255 (81.4)	6,700,360 (85.5)
Average # of Children	1.5	2.3	1.2
Lone Parent Families	**1,585 (16.3)**	**980 (18.7)**	**1,137,510 (14.5)**
Female Parent	1,245 (78.5)	730 (74.5)	945,230 (83.1)
Male Parent	335 (21.1)	250 (25.5)	192,275 (16.9)
Average # of Children	1.8	2	1.6

Source: Statistics Canada, Census, 1986-96
Prepared by the NWT Bureau of Statistics

Recent research has recognized a link between a greater risk of child violence and abuse within a family to an increase in the number of children within a family. There tends to be more violence and abuse when more children are in the family. The abuse is not only parental but can also include sibling abuse.

The average family size in both Nunavut and the NWT are greater than the Canadian average. Therefore, these numbers suggest that our children maybe at a higher risk for abuse and violence than those in the rest of Canada.

Children At Risk

Child Abuse

Child Abuse Protocol

The Child Abuse Protocol (1996) provides for a coordinated response to reporting child abuse and describes the roles and responsibilities of the signatories in the reporting, investigation, prosecution, and follow up of a report of suspected child abuse. It states the specific agreements between and among departments and agencies as to roles and information sharing.

Signatories of the 1996 protocol include the GNWT (Department of Health and Social Services, Department of Education, Culture and Employment, and the Department of Justice), as well as the RCMP and the Federal Department of Justice (NWT Regional Office Crown Counsel).

The *C&FS Act*, which replaced the child protection portion of the *Child Welfare Act,* came into force in October 1998. As a result, the Department is revising the Child Abuse Protocol, in collaboration with the signatory parties to accurately reflect changes under the new legislation. It is anticipated that the revisions will be completed by the February 2001. Until then, the 1996 protocol is in effect.

School Reports

One of the agreements within the 1996 Child Abuse Protocol was the responsibility of school personnel to:

- verbally report instances of abuse or neglect to a Child Protection Worker;
- follow up the verbal report with a written report to the Child Protection Worker; and

- provide a copy to the Director of Child and Family Services.

The *C&FS Act* requires that all of these reports must be followed up by a Child Protection Worker.

There were 92 copies of reports received by the Director from NWT schools during the 1998/1999 fiscal year.

Physical Abuse

A review of the past seven fiscal years indicates that there has been a steady increase in the reporting of allegations of physical abuse of children (Tables 7 and 8). The increased reporting could be due to greater public awareness on the need to report and/or there has been an actual increase in alleged cases of physical abuse.

Table 7: Child Physical Abuse Reports in Nunavut

Region	1992/93	1993/94	1994/95	1995/96	1996/97	1997/98	1998/99
Baffin	50	14	48	45	47	61	41
Keewatin	28	11	17	35	35	34	48
Kitikmeot	6	0	13	4	18	41	31
Total	84	25	78	84	100	136	120

Source: Department of Health and Social Services

Table 8: Child Physical Abuse Reports in the Western NWT

Region	1992/93	1993/94	1994/95	1995/96	1996/97	1997/98	1998/99
Deh Cho	12	5	13	11	7	12	6
Fort Smith (includes Hay River, Lutselk'e, Deninu)	22	12	10	37	23	30	26
Inuvik	10	3	18	12	26	45	48
Yellowknife (Includes Dogrib Board)	35	51	63	72	96	65	86
Total	79	71	104	132	152	152	166

Source: Department of Health and Social Services

The statistics presented show the number of intake reports/screening reports received by the Department of Health and Social Services that indicated an allegation of child physical abuse. These numbers do not indicate whether or not the allegations were substantiated.

Sexual Abuse

Child sexual abuse is defined as using words, sight or touching to abuse a child for a sexual purpose by someone who is in a position of power or trust over that child.[2]

Tables 9 and 10 indicate the number of intake/screening reports received by the Department of Health and Social Services documenting allegation of child sexual abuse. These numbers do not indicate whether or not the allegations of sexual abuse were substantiated.

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2 *Help, Stop Child Sexual Abuse.* 1998. Department of Health and Social Services and the Status of Women Council of the NWT.

Table 9: Child Sexual Abuse Reports in Nunavut

Region	1992/93	1993/94	1994/95	1995/96	1996/97	1997/98	1998/99
Baffin	63	42	62	53	65	79	52
Keewatin	23	37	35	51	38	27	25
Kitikmeot	20	2	6	4	6	21	25
Total Reports for Nunavut	106	81	103	108	109	127	102

Source: Department of Health and Social Services

Table 10: Child Sexual Abuse Reports in the Western NWT

Region	1992/93	1993/94	1994/95	1995/96	1996/97	1997/98	1998/99
Deh Cho	38	34	23	31	12	19	23
Fort Smith (includes Hay River, Lutselk'e, Deninu)	24	17	17	24	35	26	25
Inuvik	42	16	20	20	29	21	23
Yellowknife (Includes Dogrib Board)	33	65	54	47	48	57	44
Total Reports for NWT	137	132	114	122	124	123	115

Source: Department of Health and Social Services

The reports of alleged sexual abuse from Nunavut do not indicate any real increase or decrease over the last seven fiscal years (Table 9). The reports from the NWT of alleged child sexual abuse show a slight decrease from the previous year (Table 10). Whether this is due to the decline in actual cases of alleged child sexual abuse or to a decline in reporting is not known. It is hoped that, with the advent of the Child and Family Information System (CFIS), all child protection workers will increase the accuracy of data collected.

Sexually Transmitted Disease

The two most common sexually transmitted diseases (STDs) in children and adolescents in Canada are Chlamydia and Gonorrhea. In reviewing these numbers, it is noted that there is a 25% increase in the STDs in Nunavut. This may be due to better reporting and testing methodologies.

Infants and Children

Chlamydia can be transmitted from the genital tract of infected mothers to their newborn infants. However, according to Health Canada, in children older than one year, STDs are usually transmitted to a child through sexual abuse.

Adolescents

Sexually active adolescents are at a very high risk of contracting Chlamydia. Infection rates in the NWT for both males and females 15 to 19 years of age are substantially higher than those for the rest of Canada.

Table 11: Sexually Transmitted Diseases by Type and Gender for Youth Aged 0-19 (1994-1998)

Type	Western NWT		Nunavut	
	Female	Male	Female	Male
Chlamydia	596	100	827	233
Gonorreha	34	17	85	14
Totals	630	117	912	247
Combined	**747**		**1,159**	

Source: Department of Health and Social Services

Table 12: Sexually Transmitted Diseases by Age for Youth Aged 0-19 (1994-1998)

Age	Region	1994	1995	1996	1997	1998	Total
<1	Western NWT	0	1	5	0	1	7
	Nunavut	10	18	10	0	0	38
1 to 4	Western NWT	0	0	0	0	0	0
	Nunavut	0	0	0	0	2	2
5 to 9	Western NWT	0	0	0	0	0	0
	Nunavut	0	1	0	2	1	4
10 to 14	Western NWT	7	9	3	4	9	32
	Nunavut	21	20	6	10	10	67
15 to 19	Western NWT	152	136	136	116	168	708
	Nunavut	207	196	193	212	240	1048
Combined Total		**397**	**381**	**353**	**344**	**431**	**1906**

Source: Department of Health and Social Services

The STDs reported in 1998/1999 have increased slightly in both Nunavut and the NWT. These numbers are the highest reported in the last five years.

Table 13: Sexually Transmitted Diseases Reported for Youth by Age and Region

Chlamydia						
Region	**0 to 1 year**	**1 to 4 years**	**5 to 9 years**	**10 to 14 years**	**15 to 19 years**	**Total**
Baffin				3	124	127
Keewatin			1	4	69	74
Kitikmeot				3	32	35
Fort Smith*	1			6	108	115
Inuvik				3	48	51
Gonorrhea						
Region	**0 to 1 year**	**1 to 4 years**	**5 to 9 years**	**10 to 14 years**	**15 to 19 years**	**Total**
Baffin		1		0	14	15
Keewatin						0
Kitikmeot		1			1	2
Fort Smith*					7	7
Inuvik					5	5

* Fort Smith region includes all communities except those served by the Inuvik Regional Health and Social Services Board.

Source: Department of Health and Social Services

Suicide

1998 proved to be the worst year in recent history for suicides in Nunavut. There has been an increase in Nunavut suicides over the past ten years, culminating in a total of 28 suicides in 1998. The Nunavut annual suicide rate (all age groups) was approximately nine times the national average of 12.5 suicides per 100,000 population. The highest risk group continued to be Inuit males between the ages of 15 and 24 years. Of the total 28 Nunavut suicides, 11 were youth 19 years and under.

Note: Suicide is a relatively rare event. With such a small population base, caution should be used in interpreting suicide statistics as a single event (suicide) can significantly increase suicide rates.

Western NWT suicide statistics remained slightly higher than the national average in 1998. The total number of suicides in Western NWT was six, which was consistent with the NWT five year average of 5.6 suicides annually. Of these suicides, one was a youth.

The Government of the Northwest Territories maintained suicide statistics for Nunavut until March 31, 1999. At that point, the Nunavut Territory was created and the Government of Nunavut assumed responsibility for suicide statistics.

Table 14: Youth Suicides by Age (1994-1998)

Age	1994	1995	1996	1997	1998
0 to 12	0	0	0	0	0
13 to 16	4	3	1	2	4
17 to 19	3	6	5	13	8
Total Youth Suicides	7	9	6	15	12*

* Of 12 suicides in 1998 (in the 17-19 age group), one was in Western NWT and the other 11 were from Nunavut.

Source: Department of Health and Social Services

It is difficult to pin-point the cause of such drastic increases in youth and adult suicides in Nunavut. Suicide is understood to be very complex, but the high numbers in the North seem to be linked to high rates of trauma, violence, hopelessness and despair. The Department published *Suicide in the NWT: A Descriptive Review* in March, 1998. This document, researched in partnership with the NWT Coroner's Office and Health Canada's Field Epidemiology Program, presented a detailed picture of suicide trends, risk groups, and circumstances surrounding NWT suicides.

The Government of the Northwest Territories continues to provide direction and resources toward suicide prevention. The NWT Suicide Prevention Training (NTSPT) program aims to prevent suicides through education, skill building, healing, leadership, and strategic planning with community members and care givers.

The Department will be developing an Addictions and Mental Health Strategy which will provide a blueprint for developing mental health services in the NWT. This strategy will include links with family violence, addictions and trauma. Mental health promotion and prevention of mental illness, specifically suicide prevention, will be an integral component of the strategy.

Table 15: Youth Suicides by Age for Western NWT and Nunavut (January 1-March 31, 1999)

Age	NWT	Nunavut
0-12	0	0
13-16	1	1
17-19	0	0
TOTAL	1	1
Total youth suicides for first quarter 1999 = 2		

Source: Department of Health and Social Services

Children in Care: Children and Youth Receiving Services

In considering the best interests of the child, the Act states the following:

> *"all relevant factors must be taken into consideration in determining the best interests of a child .. with a recognition that differing cultural values and practices must be respected in making the determination."*
>
> (*Child and Family Services Act*)

Legislation

In the fall of 1998, a series of family law legislation came into force.

Family Law Act: This Act lays out the laws that effect couples separating or divorcing by covering contracts, spousal support and division of family property.

Children's Law Act: This Act sets out the legal status of children and covers the rules for custody of and access to the children covered by this Act. It further provides guidance on child support and guardianship of the estates of the children.

Child and Family Services Act: This Act provides for the protection of the child with the best interests of the child being the most important consideration in the decision making process. However, the guiding principles of this Act have moved the focus of service from crisis intervention to prevention whenever possible. The apprehension and removal of a child from family and community is seen as a "last resort". The Act also includes potential for increased community involvement through the development of a Plan of Care Committee when planning for a child and his or her family. The Act has also reduced the age limit defining a child in need of protection from under 18 years to under 16. However, age of majority continues to be defined at 19 years.

Adoption Act: This Act covers private, step-parent and departmental adoptions, counselling for parents and the maintenance of an Adoptions Registry. It has also legislated a process for opening adoption records, thereby allowing for search and reunion for the adoptive person with the biological family when they become adults.

The Minister of Justice is responsible for enforcing the *Family Law Act* and *Children's Law Act.* The Minister of Health and Social Services is responsible for enforcing the *C&FS Act* and *Adoptions Act.* These Acts will result in shifts in practice for the delivery of child protection and adoption services.

The Child and Family Services Act

On October 30, 1998, the *C&FS Act* came into force and on November 1, 1998, the *Adoption Act* came into force. Together these new Acts replace the *Child Welfare Act.* The new legislation strongly emphasizes the role of family, communities and Aboriginal organizations in working with children and their families.

The *C&FS Act* is the result of an extensive consultation and research process carried out over a number of years. It establishes the legal responsibilities and standards to ensure the protection of children ages 0 to under 16 years of age in the NWT.

The *C&FS Act* replaces previous child protection legislation used in the NWT. It better reflects the important role of the individual, family and community in taking responsibility for ensuring the health and safety of its children. The Act requires anyone who is aware of a child who may be in need of protection to immediately report it to a Child Protection Worker or another authorized person.

Implementation of the Child and Family Services Act

The Department of Health and Social Services created and implemented the Child and Family Services Standards and Procedures Manual to assist Child Protection Workers in providing services under this new Act. Since the implementation of this Act, 11 separate training workshops have occurred, eight in the West and three in Nunavut. As a result of the training, 60 individuals from the West and 58 individuals from Nunavut received Child Protection Worker appointments.

To promote public awareness of the new Act, information packages and information sessions have been provided to various organizations such as women's shelter workers, judges, Aboriginal organizations, and community councils to inform them on the changes that have occurred with the implementation of the Act. Throughout the implementation phase the public was kept informed of the changes in the Act through a print media campaign. Special interest groups who have responsibilities under the new legislation such as Aboriginal groups, parents and children were provided with information designed to meet their special needs.

A Child and Family Services Advisory Committee, led by the Department, with representation from health and social services boards, was developed to support the new Act. The Committee identifies tasks that need to be completed to assist workers in complying with the Act and improving the protection services for children at risk. All workers are encouraged to provide input and suggestions on ways to advance the implementation and administration of the Act.

The Act has an increased focus on prevention. It provides a legislated base for Child Protection Workers to work with a family before the environment has reached a stage where the child protection intervention is required. Entering into a Voluntary Support Agreement or Support Services Agreement allows for children and their families, or youth (16 to 18 years old) to be provided with a variety of support services.

The Act provides primary Plan of Care members (families, children and Child Protection Workers) with the option to include extended family or other community members in the process when they believe it would help achieve the outcome of protecting the child. Parents, the child(ren) over 12 and the Child Protection Worker have the option to move the case to court if they feel the Plan of Care process is not serving the needs of the child(ren).

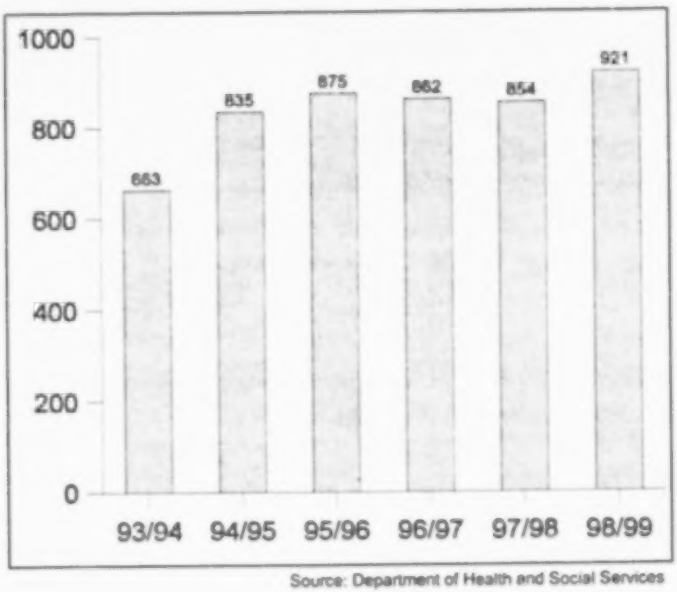
The Act creates an opportunity for increased community involvement by allowing communities to enter into Community Agreements with the Minister of Health and Social Services. Community Agreements provide authority to communities to have a greater role in decision making for children and families involved with the *C&FS Act*. Once an agreement is in place, the community can establish a Child and Family Service Committee, work to enhance community standards, and participate in the Plan of Care Committee process for children at risk in the community.

The *C&FS Act* outlines the guiding principles to be used in carrying out child protection work in the NWT and identifies the "best interests of the child" as the paramount consideration in making decisions. It respects Aboriginal customs and traditions and ensures the best interests of the child.

The children who come into care may suffer from emotional, behavioural and psychological problems. Emotional problems include depression, anxiety and anger. Behavioural problems are often exhibited as fighting with peers, running away from home and breaking the law. When these emotional and behavioural problems remain untreated, personality disturbances may develop.

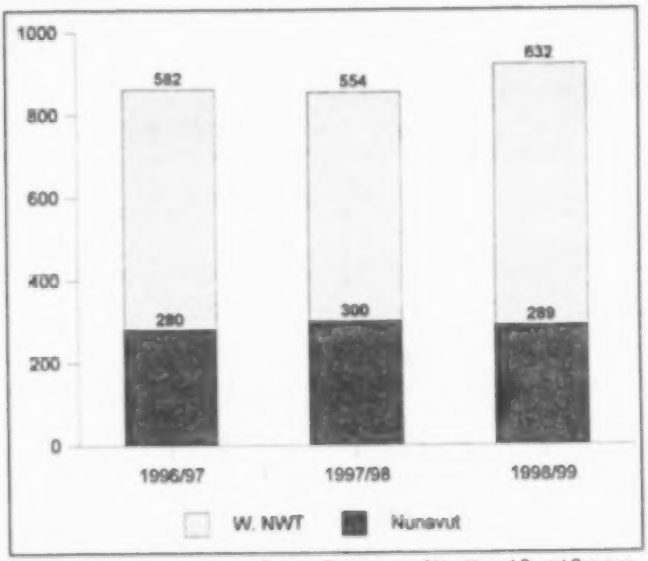
During the 1998/1999 year, 921 children received care in the NWT (Figure 6).

Figure 6: Children in Care



Source: Department of Health and Social Services

Figure 7: Children in Care for Nunavut and Western NWT - A Three-Year Comparison



Source: Department of Health and Social Services

Status Revisions from The Child Welfare Act to The Child and Family Services Act

Figure 8 illustrates the differences in status between the *Child Welfare Act* and the *C&FS Act*.

Figure 8: Difference in Status between the *Child Welfare Act* and the *Child and Family Services Act*

Child Welfare Act		*Child and Family Services Act*
		Plan of Care Agreement
Support Service Agreement*		Support Service Agreement
Custody by Agreement*	→	Voluntary Service Agreement
Apprehension		Apprehension
Supervision Order		Supervision Order
Temporary Care & Custody Order		Temporary Custody Order
Permanent Care & Custody Order		Permanent Custody Order

* items constitute status in policy (not legislation) under the Child Welfare Program

Child Welfare Worker	→	Child Protection Worker

Description of Status Awarded by Child and Family Services Act

Voluntary Service Agreement versus Custody by Agreement

The Voluntary Service Agreement (VSA) under the *C&FS Act* replaces the Custody by Agreement (CBA) under the previous child welfare program. The Custody by Agreement was not described in the previous *Child Welfare Act,* but was created in policy. Both the VSA and CBA allow the workers to enter into agreements with the parents to provide services. However, the services offered under a VSA are better described and broader. The VSA is now part of legislation where a CBA was not. Both the VSA and CBA could only be entered into when no

child protection concerns were present.

Plan of Care Agreement

The Plan of Care Agreement under the *C&FS Act* does not compare to any legal status or legal instrument found under the previous *Child Welfare Act* used in dealing with children that are in need of protection. (More information on the Plan of Care Agreement is found on page 3 of this report.)

Support Service Agreement

Support Service Agreements (SSA) under the *C&FS Act* compares closely to that of the SSA under the previous child welfare program. The new SSA is part of legislation whereas the previous agreement was part of policy. Both agreements allowed the workers to enter into agreements with the parents to provide services. However, the services offered under the current SSA are better described and broader. Under the new Act, SSAs govern services to youth 16 to 19 years, while SSAs under the previous child welfare program governed services to children 16 to 17 years.

Apprehension of a Child

An apprehension status under the *C&FS Act* occurs when a Child Protection Worker, after investigation, determines that a child is believed to be in need of protection. The Child Protection Worker must base this decision on the provisions of the *C&FS Act*. If a child is still believed to be in need of protection after 72 hours, the matter must be resolved either through a Plan of Care Committee or by the court process. A child with apprehension status may remain in the family home.

Under The *Child Welfare Act*, the Child Welfare Worker made the decision to apprehend and remove the child from the parents' care,

according to the provisions of the *Child Welfare Act*. Under this Act, the worker could apprehend a child for up to 48 hours without having to bring the matter before the court.

Supervision Order

Under the *C&FS Act,* the Director of Child and Family Services has the legal authority to provide ongoing monitoring of the family for a specified period of time, up to a maximum of one year. These orders may be extended. During that time the Child Protection Worker must work with and support the family to make changes in their situation while ensuring the safety of the child. In some supervision orders, the judge will define specific tasks which the family, child and/or Child Protection Worker need to complete prior to the termination of the order.

Under the *Child Welfare Act* the Superintendent of Child Welfare also had the authority to monitor a family for the same specific time periods. However, the *Child Welfare Act* did not define a judge's ability to attach conditions to the order.

Temporary Custody Order versus Temporary Care and Custody Order

This type of order under the *C&FS Act* grants the Director the legal authority to retain custody of a child for a specific period of time (up to a maximum of one year) without review. This order is used when it is felt that the child will continue to be at risk of harm if he or she remains in the family home. This order is based on the belief that with support and services the family will be able to resolve the protection issues and have the child return to family care. Temporary Custody Orders may be sought for up to a maximum of two years of continuous care. Under the new Act, the Judge has greater ability to attach conditions to a temporary order including access rights of the parents.

The *Child Welfare Act* also had the provision for a child to become a Temporary Ward through a Temporary Care and Custody Order. An

order was granted for a period of up to one year and could be extended for a period of three years continuous care. A judge's ability to attach conditions to an order were limited and not defined in the legislation.

Permanent Custody Order

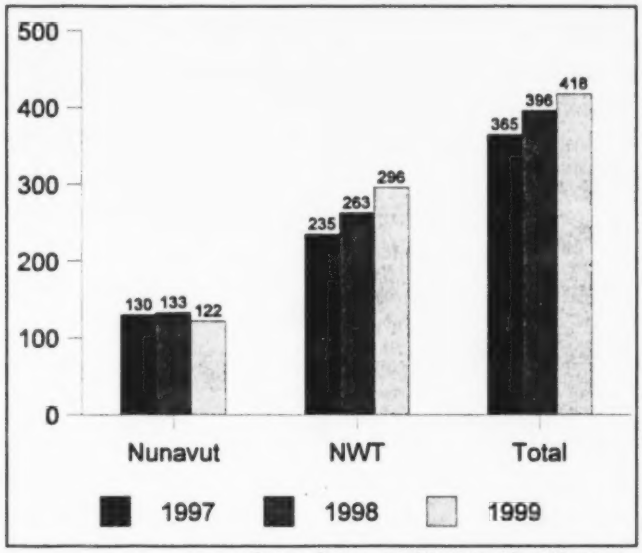
Under the *C&FS Act,* a Permanent Custody Order terminates the parental rights as legal custodians of a child and transfers the parental responsibility to the Director of Child and Family Services. However, the court now has greater ability to vary permanent custody orders by providing parents various forms of access to the child and granting any terms and conditions that the court considers necessary and proper. There are two situations when this order is granted. The first is when a parent(s) seeks to surrender their children for the purpose of adoption. The second is when a child is at continued risk of harm, and it is believed that there is no possibility of resolving the child's/family's situation within a reasonable period of time.

Under the *C&FS Act,* permanent Custody Orders are in effect to the child's sixteenth birthday. However, the Director may make an application before the court to have the child's custody extended to his or her nineteenth birthday.

Under the *Child Welfare Act,* the Permanent Care and Custody status assigned the full legal care and custody rights to the Superintendent of Child Welfare, removing all parental legal rights over the child. The ability to grant access to the parents was not addressed in the Act. A child was made a permanent ward to his or her eighteenth birthday with the possibility of extension for one year.

Children in Care Statistics

Figure 9: Children in Care - A Three-Year Comparison



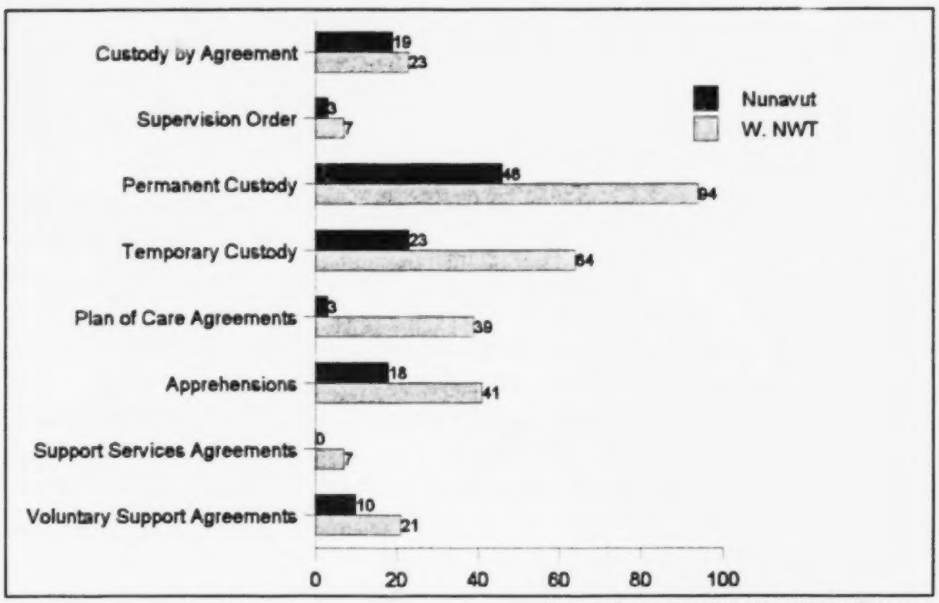
Source: Department of Health and Social Services

Table 16: Children in Care - Placements

Placements	Nunavut	NWT
Adoption	1	1
Room and Board (R&B)	1	5
Northern Residential Treatment Centre	5	10
Southern Residential Treatment Centre	6	21
Group Home	30	17
Other	6	0
Foster Home	72	232
Parent	1	10
Total	122	296

Source: Department of Health and Social Services

Figure 10: Legal Status of Children in Care on March 31, 1999



Source: Department of Health and Social Services

Foster Homes

Sometimes in the life of a child, it is necessary for him or her to live with another family. The foster care program provides a substitute family environment for children who come into the care of the Director of Child and Family Services. The objective of every foster care placement is to provide children with an experience of positive family life while maintaining birth family involvement and cultural identity. Foster families play a key role in the child protection system and their value cannot be overstated.

Within the NWT, there are two major types of foster homes:

- regular approved foster homes may provide care to any child or youth that requires placement services; and
- provisional/extended family foster homes provide care to specific children and youth that are known to the family in a meaningful and positive way.

The *C&FS Act,* proclaimed in October 1998, defines provisional/extended family foster homes as the preferred placement option for all children and youth requiring placement services.

Health and social services boards are responsible for the delivery of the foster care program in the NWT through legislation and standards administered by the Department of Health and Social Services. Child Protection Workers guide applicants through an established approval process while Child Protection Supervisors approve homes on behalf of the Director of Child and Family Services.

During the 1997/98 fiscal year, there were 149 regular approved homes operating in the Western NWT with 52 in Yellowknife, 44 in Inuvik, 23 in the Deh Cho, 12 in Hay River, 8 in the Dogrib and 5 in Fort Smith. A total of 110 Provisional/Extended Family foster homes were also utilized during this period. Total numbers for the Eastern NWT were not

available, however, the Baffin region reported a total of 96 regular and provisional foster homes for this period.

Foster families are compensated for the services they provide. Basic maintenance rates were developed in relation to the Social Food Allowance Scales and are intended to cover expenses including food, personal care items, household costs and miscellaneous items. Under this methodology, communities are grouped into scales with higher rates payable in the more remote communities. Per diems range from $24 in southern communities to $47 in more isolated locations. A clothing allowance is paid in addition to these amounts.

Foster parents caring for children and youth with special needs are compensated for the additional time, effort and skills that are required to provide services. Special needs rates are calculated by Child Protection Workers in accordance with the child's needs, as well as policy established by their health and social services board.

Adoptions

The *Adoption Act* was passed on June 2, 1998 and came into force on November 1, 1998. It replaces that part of the old *Child Welfare Act* that dealt with adoptions.

As a result of this new piece of legislation, there are a number of significant changes. Some of the major changes are as follows:

- No Departmental or Private Adoption can occur without a pre-placement report (home study report). This ensures that a child is placed in an approved, appropriate and secure environment.
- Children aged 12 and older have certain rights regarding adoption and there is provision for their consent.
- There are provisions pertaining to revocation of consent for both consenting parents and children over the age of 12 years.
- Aboriginal organizations can, in some situations, play a role in determining placement for children.
- Adoption orders can provide for access to birth parents.
- Unmarried couples can adopt.
- Out-of-territory adoptions are regulated.
- There are formal provisions addressing subsidized adoptions and assistance after adoptions.

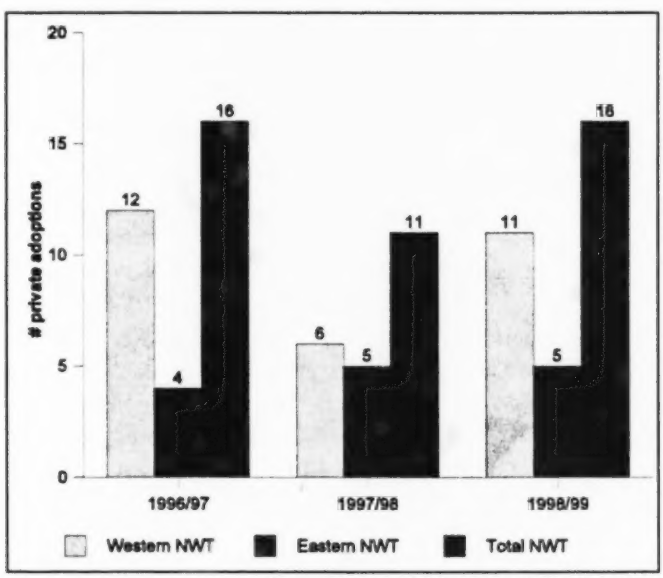
- An official Adoption Registry is required to be created and there is provision for updates of family information to be added.

- An open record system has been established whereby, at the age of majority, the adoptee and/or the birth family may have access to their records if the adoption occurred after November 1, 1998.

Individuals who work in the area of adoption must complete the required statutory adoption training and must have a valid Adoption Worker appointment. Training is provided through the Department of Health and Social Services and the Director of Adoptions signs the official appointment.

Since the implementation of the new *Adoption Act*, three separate training sessions have occurred in the NWT: two in the NWT and one in Nunavut. Approximately 42 individuals have been trained, 37 of those are front-line social workers who work for the Department.

Figure 11: Private Adoptions



Source: Department of Health and Social Services

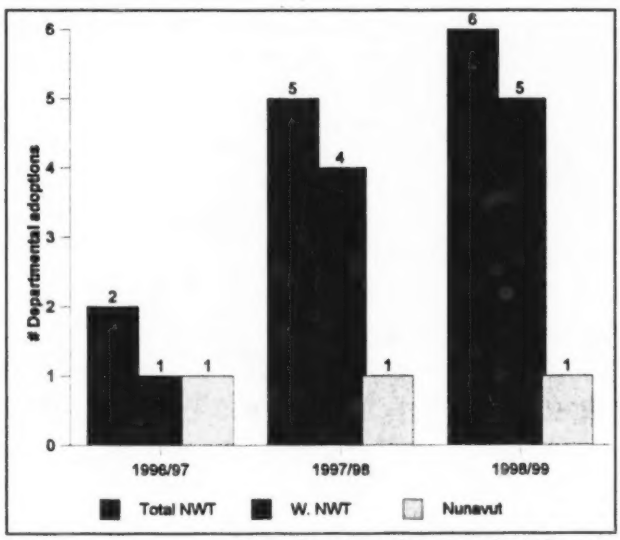
While the new Act has only been operational for approximately five months, there have been relatively few problems. This may be partly due to the fact that the adoptions started prior to November 1, 1998, continue to be processed under the old system.

Thus far, adoptions have been processed efficiently, with good cooperation between the clients, the front-line staff, the legal system and the Supreme Court.

Adoption Rates

There were 22 adoptions during the 1998/1999 year. The changes in the number of adoptions from previous years are insignificant and there do not appear to be any trends developing.

Figure 12: Departmental Adoptions



Source: Department of Health and Social Services

The *Aboriginal Custom Adoption Recognition Act* came into force on September 30,1995, and since that time, appointed Adoption Commissioners throughout the NWT have been processing custom adoptions. Adoption certificates are completed by Adoption Commissioners and are forwarded to the Supreme Court Clerk for stamping and filing. Those certificates enable amendments to the child's birth registration.

It appears that approximately two-thirds of all custom adoptions processed occurred in Nunavut. In the past year, the number of custom adoptions has decreased slightly in both Nunavut and the NWT.

The Adoption Registry

With the new *Adoption Act* coming into force on November 1, 1998, an Official Adoptions Registry was required. The Registry allows for the storage and maintenance of information and records pertaining to all adoptions. Registry information completed under the new Act will be controlled and disclosure of information and reunions will be facilitated.

Adoptees, birth parents, adopting parents, and in some situations, extended birth and adoptive family, will have access to records after the adopted person has reached the age of majority. This applies to all adoptions that have occurred after November 1, 1998.

Persons wishing identifying, non-identifying, search and reunion information and services must complete a Request for Registry Information and forward it to the Registrar of the Adoptions Registry.

New Directions

While the *C&FS Act* and the *Adoption Act* have been implemented, there is an ongoing need to monitor and evaluate the changes from a system wide perspective. More training sessions for Child Protection Workers and Adoption Workers are planned. In addition, two important initiatives are currently in the works:

Child and Family Information System: A standardized computer system for all records across the NWT will be developed. The Child and Family Information System will allow for the computerized gathering of information regarding children in care, the services provided to them and their families and the further development of a comprehensive data base.

Child and Family Services Program Review: The Department is planning to contract a formal system-wide review of the child welfare services in the Western NWT. It is anticipated that the review will begin during the fall of 1999.

The Department, together with health and social services boards, will continue to ensure that the highest quality services possible are available to their clients in the NWT.

Conclusion

The 1998/1999 fiscal year has been a busy one for the Department of Health and Social Services.

The coming year promises to offer new challenges and opportunities for service to the children and the families of the NWT. The Department will continue to strive to provide the best possible services to children and families, and to promote the health and well-being of all individuals, especially children.

Appendix 1: Funding Provided for the Establishment and Maintenance of NWT Early Childhood Wellness Programs

Western Arctic Regions	(Actual Expenditures) Federal - First Nations and Inuit		(Committed Amounts) Federal - Health Promotion Programs Branch (Off-Reserve Funding)						(Committed Amounts) GNWT	
	Brighter Futures	SPWP	Head Start	CPMP	ACAP	CAPC	CAP	PHF	Healthy Children	Total
Deh Cho Region	371,526.00	47,406.78	249,487.00	85,840.00	0.00	303,765.00	0.00	0.00	185,409.00	1,243,073.78
Dogrib Treaty 11 Region	440,962.11	33,322.75	0.00	0.00	0.00	120,945.00	0.00	36,000.00	158,550.00	789,779.86
Gwich'in Region	383,236.00	36,199.00	115,500.00	0.00	0.00	0.00	0.00	0.00	110,940.00	645,875.88
Inuvialuit Region	747,318.16	91,463.60	115,500.00	40,000.00	75,000.00	0.00	0.00	28,000.00	679,581.00	177,686,276.00
Sahtu Region	359,114.00	39,442.00	0.00	0.00	0.00	0.00	0.00	0.00	170,199.00	505,755.00
Treaty 8 Region	276,422.00	33,963.00	110,500.00	106,020.00	0.00	128,234.00	0.00	0.00	263,158.00	918,297.00
Yellowknife Region	144,679.00	1,000.00	225,000.00	160,500.00	91,000.00	284,444.00	48,895.00	52,000.00	390,750.00	1,408,068.00
Total West	**2,723,257.27**	**282,797.13**	**815,987.00**	**392,360.00**	**166,000.00**	**837,388.00**	**48,895.00**	**116,000.00**	**1,958,587.00**	**183,197,125.52**

Eastern Arctic Regions	(Actual Expenditures) Federal - First Nations and Inuit		(Committed Amounts) Federal - Health Promotion Programs Branch (Off-Reserve Funding)						(Committed Amounts) GNWT	
	Brighter Futures	SPWP	Head Start	CPMP	ACAP	CAPC	CAP	PHF	Healthy Children	Total
Baffin Region	1,621,645.00	110,986.00	270,631.00	10,000.00	40,000.00	0.00	6,575.00	0.00	644,558.00	2,704,404.00
Keewatin Region	968,537.00	104,673.40	286,500.00	101,000.00	0.00	50,612.00	0.00	32,000.00	1,090,767.00	2,634,089.80
Kitikmeot Region	758,469.00	59,187.00	248,382.00	115,000.00	0.00	0.00	0.00	0.00	273,730.00	1,454,768.00
Total East	**3,348,651.00**	**274,846.40**	**805,513.00**	**226,000.00**	**40,000.00**	**50,612.00**	**6,575.00**	**32,000.00**	**2,009,055.00**	**189,990,387.32**